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CONFIRMATION NO. 7888

Bib Data Sheet

SERIAL NUMBER 10/667,969	FILING DATE 09/23/2003 RULE	CLASS 297	GROUP ART UNIT 3636	ATTORNEY DOCKET NO. 7326
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

ITALY TO2002A000837 09/24/2002

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 01/05/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	Examiner's Signature Initials	ITALY	2	10	1

ADDRESS

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TITLE

HEADREST CUSHION ACTUATING DEVICE, PARTICULARLY FOR VEHICLE SEATS

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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